PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

	. Eff	ective Oc	tober 1, 20	003		•		10,	Wi	234	-81	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS					IOTHIT Z			(LL ENTITY	
FOR		NUMB	NUMBER FILED		IBER EXTRA	BASI		FEE	_	RATE		
TOTAL CHARGEABLE CLAIMS		1,17	1,17		A C	- BASI		385.0	Of	BASIC F	EE 770.00	
INDEPENDENT CLAIMS		10	# (Ominus 20=		26	- XS	9=		OF	X\$18=	= 1468.	
MULTIPLE DEPENDENT CLAIM PI		DDECENT.				X4	3=		OF	X86=		
1.19		· · · · · · · · · · · · · · · · · · ·				+14	5=		OF	+290=		
*If the differen	nce in column 1	is less than	less than zero, enter "0"		column 2	TOT	AL	·	OR	`L	17:20	
11/00/	CLAIMS AS	AMENDE	MENDED - PART II						_		R THAN	
140210	(Column 1))	(Colum		(Column 3	SMA	LL E	NTITY	OR		ENTITY	
Total Independent	REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total	+ 46	Minus	1 xx H	-6	=	X\$ 9	=		OR	X\$18=		
Independent FIRST PRE	SENTATION OF A	Minus	*** 3	3	= .	X43			OR	X86=	 	
THIOTILE	SENTATION OF I	NOLTIPLE DI	EPENDENT	CLAIM		+145	\top			.000	 	
					·	TO	AL		OR	+290≈ TOTAL	ļ	
	(Column 1)		(Columr	12)	(Column 3)	ADDIT, F	EE L	·	OR ,	ADDIT. FEE	L	
Total Independent	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ST SR SLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	, rec	
Independent		Minus	###		=	X43=	1		1	X86=		
THIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT C	LAIM			+		OR	×00=		
						+145=			OR	+290=		
	(0.1		•			ADDIT. FE			DR AI	TOTAL DDIT. FEE		
1	(Column 1) CLAIMS		(Column HIGHES		(Column 3)				_			
	REMAINING AFTER AMENDMENT		NUMBER PREVIOUS PAID FOR	R SLY	PRESENT EXTRA	RATE	TIC	DDI- DNAL EEE		RATE	ADDI- TIONAL	
Total	*	Minus	**		=	X\$ 9=	1		<u>, </u>	X\$18=	FEE	
Independent	*	Minus	***	i i	=	X43=	1-		`` -			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							 		OR -	X86=		
If the entry in colu	ımn 1 is less than th	e entry in colu	ma 2 wells for	in est:		+145=		0	R ·	+290≃		
"If the "Highest No	Imber Previously Pai Imber Previously Pa	id For" IN THIS id For" IN THIS	SPACE is les	s than 2	20, enter "20."	TOTAL ADDIT. FEE			R AD	TOTAL DIT. FEE		
The 'Highest Nur	nber Previously Paid	For" (Total or	Independent) i	s the hi	ghest number	found in the ap	propr	iale box in	colum	n 1.		